

# H1N1 Myths and Facts

The amount of information circulating about the H1N1 'swine' flu pandemic can be overwhelming. Your pharmacist is available to help separate fact from fiction. The facts below will help provide you with accurate information, but bring any of your unanswered questions about H1N1 to your pharmacist.

**Myth #1: Wearing a surgical mask when out in public places is the most effective method to prevent catching the H1N1 flu virus.**

**Facts:** Generally speaking, wearing a mask doesn't provide much – if any – protection from the virus and in fact it can heighten the risk for contamination when used improperly.<sup>1</sup> If you have flu symptoms or are caring for someone who has been infected with H1N1, you can use a surgical mask but it is important to understand how to use it properly.<sup>2</sup> You can speak with your pharmacist about buying and using a mask. Protective eyewear is also recommended for the caregiver. The most effective ways to prevent the flu are some of the simplest to do, such as washing your hands frequently or using alcohol-based hand sanitizers.

**Myth #2: A pandemic means that there is nothing that people can do to prevent the virus from spreading.**

**Facts:** A "pandemic" simply means that multiple countries are affected and that humans are easily spreading the virus to each other. A pandemic has been officially declared by the World Health Organization but pandemics can be mild, moderate or severe. At this time the H1N1 pandemic is considered moderate.<sup>3</sup> Public health experts and agencies are giving simple, straightforward advice about prevention such as frequent hand washing, avoiding contact with those who are infected or unwell (a distance of about two metres) and keeping your hands away from your nose, mouth and eyes.

**Myth #3: It's easy to tell the difference between a cold, seasonal flu and H1N1.**

**Facts:** It's not easy to tell the difference between seasonal flu and H1N1. Like seasonal flu, H1N1's symptoms are cough, fever, sore throat, runny nose, headache and body aches. Some people with H1N1 have also experienced vomiting and diarrhea.<sup>4</sup> Cold symptoms are usually a bit different, characterized by nasal congestion and unlikely to be accompanied with a fever.

**Myth #4: There will be an inadequate supply of the H1N1 vaccine available to protect Canadians.**

**Facts:** The Government of Canada is purchasing 50.4 million doses of H1N1 vaccine. The government has a long-standing contract with pharmaceutical company GlaxoSmithKline to meet Canada's needs for vaccine during a pandemic.<sup>5</sup> The vaccine is not yet available, but the Public Health Agency of Canada estimates that vaccinations will begin soon. While the regular annual flu shot doesn't provide protection against H1N1, it is recommended to prevent the seasonal flu virus.

**Myth #5:** Once school starts, if any child becomes ill with H1N1 at my son or daughter's school the school will close.

**Facts:** The Public Health Agency of Canada is recommending against school closures at this time because they are not deemed effective in stemming the spread of the virus.<sup>6</sup> The most important steps to take to prevent its spread are identifying children or staff who are ill or have symptoms consistent with H1N1, informing anyone with the symptoms of the virus to stay at home, coughing and sneezing into your arm or a tissue and frequent hand washing.

**Myth #6:** The H1N1 flu virus impacts all age groups equally.

**Facts:** Several age groups appear to be more susceptible to the H1N1 flu virus. Adolescents and young adults, as well as pregnant women appear to be at higher risk or vulnerable to infection. Those with underlying health conditions such as diabetes or asthma and First Nations people are also at greater risk.<sup>7</sup>

**Myth #7:** I can catch the H1N1 'swine' flu by eating pork.

**Facts:** People cannot get H1N1 from eating pork.<sup>8</sup> Cooking meat properly is important for reducing the risk of foodborne illness.

**Myth #8:** A diagnosis of H1N1 is catastrophic, there is nothing that can be done to treat it and few people recover.

**Facts:** Most people who have contracted H1N1 flu have fully recovered and did not require hospitalization or medical care.<sup>9</sup> When symptoms are mild in an otherwise healthy person, H1N1 can be treated with the same methods as seasonal flu. A pharmacist can help provide advice about managing symptoms using over-the-counter medications. Individuals requiring prescription antiviral treatment need to promptly see their physician, for example, people who have severe symptoms, those whose condition is rapidly deteriorating, have underlying health conditions or are pregnant.<sup>10</sup>

**Myth #9:** There are no effective treatments for the H1N1 virus.

**Facts:** So far, research shows that two prescription antivirals are effective in treating H1N1 – Tamiflu (oseltamivir phosphate) and Relenza (zanamivir). The Public Health Agency of Canada is recommending the use of antivirals only when H1N1 symptoms are moderate to severe and a patient is at great risk for complications. The Government of Canada and individual provincial governments have stockpiled antiviral medication, but it needs to be used in appropriate circumstances so that there is enough available when it is truly needed.<sup>11</sup>

1 <http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/inf-mask-masque-eng.php>  
2 <http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/guidance-orientation-05-03-eng.php>  
3 [http://www.euro.who.int/influenza/AH1N1/20090611\\_11](http://www.euro.who.int/influenza/AH1N1/20090611_11)  
4 [http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/fs-fr\\_h1n1-eng.php](http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/fs-fr_h1n1-eng.php)  
5 [http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/faq\\_rg\\_h1n1-eng.php#vac](http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/faq_rg_h1n1-eng.php#vac)  
6 <http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/interim-provisaires0819-eng.php>

7 [http://www.cmaj.ca/earlyreleases/31aug09\\_editorial.shtml](http://www.cmaj.ca/earlyreleases/31aug09_editorial.shtml)  
8 [http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/faq\\_rg\\_h1n1-eng.php#faq6](http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/faq_rg_h1n1-eng.php#faq6)  
9 [http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/faq\\_rg\\_h1n1-eng.php#faq5](http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/faq_rg_h1n1-eng.php#faq5)  
10 [http://www.who.int/csr/disease/swineflu/notes/h1n1\\_use\\_antivirals\\_20090820/en/index.html](http://www.who.int/csr/disease/swineflu/notes/h1n1_use_antivirals_20090820/en/index.html)  
11 [http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/faq\\_rg\\_h1n1-eng.php#faq2](http://www.phac-aspc.gc.ca/alert-alerthe/h1n1/faq_rg_h1n1-eng.php#faq2)